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ABSTRACT

The paper contains proceedings of a panel on the declassification/transition program in a Champaign, Illinois, elementary school designed to remedy the situation of overclassification of Black children as educable mentally handicapped (EMH). Session leader, J. First, introduces the problem of the classification of excessively large numbers of Black children as EMH. J. Weaver, the first of three panelists, traces the beginnings of the declassification/transition program at the pilot site. Among the steps taken were reevaluation of all EMH students with IQ scores of 70 or above, establishment of new EMH eligibility criteria, and inservice education of teachers and administrators. A second panelist, J. Mahan, shares strategies for districtwide change and policy ramifications in regard to the placement of Black students. A final panelist, P. Adkisson, describes the declassification/transition program in terms of setting and subjects, assessments, what happens after declassification, and future plans. Policy considerations derived from the Champaign experience include a need for incentives encouraging public school systems and teacher training institutions to recognize the diversity which characterizes the typical classroom and a need for incentives to encourage districts to route problem learners through additional regular education loops as a prerequisite to making referrals for special education consideration. (SB)

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One Community's Commitment to Remedy Injustice:
Declassification/Transition of Minority EMH Students,
Champaign, IL

a panel presentation

at

The CEC Conference on the Exceptional Black Child

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Session Leader/ Joan M. First, Race Desegregation Specialist, Illinois/
Indiana Race Desegregation Assistance Center, School of Education,
Indiana University.

Good morning. My name is Joan First. I am employed as a race desegregation specialist by the Illinois/Indiana Race Desegregation Assistance Center, a Title IV program of the Indiana University School of Education.

In that position, I am responsible for on-site delivery of technical assistance and training related to issues of educational equity in many Illinois and Indiana desegregated and desegregating school systems.

We have come here this morning to consider what, in my experience, is one of the most pervasive and damaging aspects of segregation and resegregation found in America's public schools: The classification of excessively large numbers of Black children as educable mentally handicapped (EMH).

The typical school corporation with which I work has twice as many Black children classified educationally mentally handicapped as would be expected, based upon the numbers of Black youngsters enrolled in each district. That is, while Black children may comprise 25 percent of total enrollment, they may account for 50 percent of EMH class enrollment. In many instances three or more times as many Black children are enrolled in EMH classes as might be expected.

The vast majority of these Black youngsters have IQ scores well above 70. In fact, we find significant numbers of minority EMH students with IQ scores into the mid-to-high eighties and, in some cases, the 90's. In many communities, it is common practice to place the majority of white children designated as having special needs in learning disability classes and the majority of Black children with special needs in EMH classes, a practice which also contributes to racial disproportionality. Since many EMH students are assigned to self-contained units, or are minimally mainstreamed, the net result is that they spend their days in undesirably segregated environments. In many districts these classes may represent a segregated sub-system operating within an otherwise desegregated school system.

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The Children's Defense Fund, in a new publication entitled Portrait of Inequality¹, has vividly profiled the dimensions of this problem nationally as follows:

- Black elementary and secondary school children are placed in programs for the mentally retarded at more than three times the rate for white children. Based upon 1976-77 OCR data, CDF estimates that approximately 200,000 black children would have been returned to regular classes or other more appropriate placements during the 1976-77 school year, had placement rates for Black children been the same as for white children.
- According to 1978 OCR data, 3.5 percent of Black public school students were in classes for the educable mentally retarded, as compared with 1.1 percent of all white public school students.
- Incidentally, and conversely, 2.1 percent of all white public school students were placed in classes for the gifted and talented, as compared with 1.3 percent of Black public school students.

From the perspective of the Desegregation Assistance Center, the problem which I have just described represents one of the most deeply discriminatory actions which the public educational system can take against a Black child, for the label "retardate" affixed to the child by the school system permanently alters that child's status before society, profoundly limiting opportunities for future education and employment as well as the child's view of self as a competent person.

From a technical assistance standpoint, the correction of this problem is extremely difficult to achieve, both educationally and politically. This is perhaps particularly true in states which have traditionally excelled in the delivery of services to children with special needs. To discuss the misclassification issue with school personnel is to deeply challenge one aspect of special education programming of which they often may otherwise be justifiably proud. The result is frequently significant resistance to change on the part of staff.

1. Marian Wright Edelman and Paul V. Smith, Portrait of Inequality: Black and White Children in America, The Children's Defense Fund, Washington, D.C. 1980.

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Adding to the depth of that resistance is the reality that school districts receive reimbursement tied to the classification of children. To return misclassified children to the regular classroom means that districts not only lose funds under P.L. 94-142, but also must assume responsibility for additional costs related to helping the child overcome the original learning problem and the additional distance which he/she may have fallen behind because teachers expect less of an EMH student.

For all these reasons, we find that unusual degrees of leadership and courage are required of administrators and school board members who seek to remedy this injustice. This brings me to the point of introducing our panelists who, in my considered opinion, have exhibited those qualities. From the Unit #4 School District at Champaign, IL are, in the order in which they will speak: Dr. John Weaver, Director of Special Education; Dr. James Mahan, Superintendent; Dr. Rose Marie Adkisson, Coordinator of Elementary Special Education and Director, the Elementary Transition Program; and Rev. A.C. Wright, minority member of the Unit #4 Board of Education. I have watched these four people cope with a great deal in relationship to this issue during the past 15 months. Together they have accomplished things which could not have been accomplished had any one of them been lacking in commitment.

John, at this time I would like to turn the program over to you:

Panelist #1/ John Weaver, Ph.D., Director of Special Education, Unit #4 Schools, Champaign, Il.

My presentation today is only vaguely representative of what is printed in the program. There is a reason for that. I feel that too often we go to conferences and listen to presentations directed at the results of a given project or study. We hear that one group did significantly better than another group, based on given measurements. We seldom hear what was involved in the planning stages. We seldom hear about the rocky times involved in getting a project to the place where it can actually occur. We hear of the glory but seldom the pain.

The net result is that we often leave conference presentations with a strong desire to do nothing, based upon the assumption that "it worked there, but it won't work here" or a conviction that "anything you can do, I can already do better." As the result, we often forge on ahead making mistakes which could have been avoided had we only known more. It was Patrick Henry who stated he had but one lamp by which his feet were guided, and that was the lamp of experience. I wish to make our lamp of experience available to you, should you desire to undertake a similar project in your community.

For us, it all started in December, 1979. I was on my way to a conference in an elementary school and stopped by my office to pick up some reports. In so doing, one of our staff social workers greeted me with, "John, what does that announcement on the radio mean?" To which I replied, "What announcement?" Since my car radio was inoperative at the time, I had heard no announcement. The social worker replied, "The announcement that Champaign Schools have a disproportionate number of minorities in special education." Now a number of directors of special education in this country are developing certain levels of paranoia, so to be in keeping with that image, I responded, "Oh, who in hell said that?" The social worker's answer was one I didn't expect. She said, "The Associated Press".

Soon after my arrival at the school, I was called to the office to take a phone call from the superintendent. He, too, wanted to know what the announcement meant. I responded with my most scholarly, "I don't know."

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I did not have the luxury of remaining in that state for an extended period of time. To make this part of the story short, we found that the Office of Civil Rights had released the information to the Associated Press that our school district was midway down on a ranked list of the top 100 districts in the country with the greatest disproportionality in special education.

The information released had come from our child count, and it was simply a press release, not an OCR citation. However, citation or not, that release provided the stimulus for us to not only look at some things, but to also plan to do something about them.

Our next step was to determine what the disproportion was, and in what categorical program it was the greatest. I called for all central file information on students in our program for educably mentally handicapped. I found that, while our minority enrollment district-wide was about 25 percent, we had a population of about 70 percent minority in our EMH program. As I examined data for a two-year period, I found percentages of 68 and 72 percent, and eventually accepted the 70 percent figure as a compromise approximate.

Since the State of Illinois does not have an absolute IQ cutoff for eligibility for an EMH program, I decided to see what would happen if we were to use a cutoff of 70-or-below IQ as a criteria for EMH placement. When I looked at our data, I found that 66 percent of youngsters currently in the EMH program would not be eligible for it if the IQ cutoff was 70. Obviously both minority and majority children would be affected by such a criteria change, but using the IQ adjustment alone would result in the 70 percent minority population being reduced to 51 percent. Now, what to do about it all?

Our first priority was clearly children and their needs. We did not want to rush into something where children in need of service would simply be dumped and, being no longer eligible for services, would fail academically and/or emotionally in the regular school program.

The first thing we thought of doing was to redesign the EMH program so no child would leave his or her home attendance center. We thought about utilizing existing staff and adding more to allow for self-contained and resource help at every attendance center. We developed a plan, complete with projections for each attendance center. While some of our staff found this plan acceptable, others of us found it unacceptable because it did not really

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address the problem.

Joan First, of the Desegregation Assistance Center, and I began to meet so regularly that people were beginning to talk. We discussed every aspect of our identification, evaluation and placement procedures. We talked about a variety of alternatives. By now the word was out: We were concerned about the problem; we intended to do something about it. Some reactions began to develop.

One of the most interesting reactions came as Joan began to provide me with copies of articles written by Jane Mercer and others concerned ~~about~~ about minority assessment issues. I would duplicate the articles and distribute them to our psychologists. Now a psychologist who had written articles in opposition to Mercer's views had once been on ^{our} his staff and some of his friends still are. I found that if I duplicated my articles and distributed them in the afternoon, by morning I would find duplicated copies of articles of rebuttal on my desk.

In February, 1980, Richard Figueroa of the University of California, Davis spoke to our administrators concerning minority assessment issues, disproportionality in special education, SOMPA, and relevant litigation such as the Larry P. and Diana cases. We invited the psychologists to participate in that meeting. After having lunch with Dr. Figueroa, the psychologists became considerably more open to what he was saying. I felt that a key factor in the development of that openness was Dr. Figueroa's agreement with the psychologists that their professional judgment should be a factor in any evaluation that takes place.

Another turning point resulted from that meeting. Dr. Figueroa and I had breakfast and discussed criteria for eligibility for a program for the mentally handicapped. I suggested that through reevaluation we could well find ourselves reclassifying students as learning disabled, rather than educable mentally handicapped, and we would then wonder what to do about our disproportionate numbers of minorities in learning disabilities programs. Dr. Figueroa's response to that was: "You don't reclassify; you declassify and support those students within the regular education program.

Planning continued, but now it took a different direction. The superintendent, assistant superintendent, Joan and I were frequently involved in discussions about what to do, and how to do it in a reasonable manner which would gain the greatest staff acceptance and benefit children. We were obviously at a point

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where we needed more outside help and fresh thinking.

The Illinois/Indiana Race Desegregation Assistance Center had brought us Richard Figueroa. Now, with the Center's assistance, we arranged a meeting with a second consultant, W. Alan Coulter of the Directions and Resources Group, Austin, Tx. Alan met with key members of our administrative staff to discuss what a sound educational program designed to successfully transition declassified students back into the regular classroom would look like. That meeting was another turning point; a plan began to develop. Our emerging notion of a transition program was that it should involve gradual reevaluation, declassification, a return of students to the regular classroom, and adequate additional supports for both students and receiving teachers.

The next step was to examine our testing program. We accomplished this by having Alan Coulter come to Champaign to conduct a SOMPA Workshop on-site. Part of the cost of that workshop was defrayed by the Illinois Office of Equal Educational Opportunity. In addition to our own assessment staff, 15 professionals from outside our district, including one from the State Department of Education Division of Specialized Educational Services participated. Some really positive attitudes were developed during that workshop and we began to solidify a plan which could be presented to various groups. Basically, it included the following:

1. We would begin to reevaluate all FMH students who had an IQ score of 70 or above on their most recent evaluation.
2. We would establish a new EMH eligibility criteria which required that students score two standard deviations below the mean (below 70 on the WISC-R or 68 on the Binet) plus two standard deviations below the mean on the ABIC (Adaptive Behavior Inventory for Children) which is part of SOMPA. Professional judgment would be exercised.
3. We would pilot the program during the 1980-81 school year with two existing classes of EMH students at the primary level of Carrie Busey School.
4. We would utilize consulting resource teachers and teacher aides as supports.
5. Based on first year results, we would implement the program at other attendance centers during the following year.

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6. Declassified students from the pilot group would be returned to their home attendance centers the following year.
7. Consulting resource teachers and aides would follow the transitioned students.
8. Teachers and administrators would be heavily in-serviced during the process.

There were some interesting reactions to our plan:

Carrie Busey Staff: Initially, teachers at the pilot site were agreeable to the program being initiated in their building. However, some of our special education teachers began to express fears that their mainstreamed students would get less attention, once transitioned students were also in the regular classroom, and soon regular classroom teachers began to express the same concerns. When we took the transition plan to the Board of Education, Carrie Busey teachers went on record as preferring not to be involved in the pilot program.

Chief Administrators of the District: This group was essentially accepting and supportive. There were major questions, as Dr. Mahan has noted, concerning cost of implementation.

Building Principals: There were some interesting responses from this group. Some felt it was a great idea; others felt they simply could not support it. A couple expressed the opinion that we should wait until the state or a court told us we had to act.

Psychologists and Social Workers: This group became our strongest supporters. The SOMPA workshop was a significant factor in the development of that support and in their subsequent response to the challenges involved in future pro-ram development.

The Black Community: The superintendent scheduled a meeting with some representatives of the black community who had been a sounding board for school issues throughout the year. They were interested and supportive.

EMH Teachers: This was probably the area of our greatest opposition. There was a general feeling on the part of EMH teachers that their students needed EMH services and would regress both academically and emotionally without the support of the EMH program and EMH teachers. Some of these teachers were emotionally attached to their students and didn't like to think about letting go. Others were concerned about the obvious implications for jobs.

EMH teachers, as a group, opposed the transition program formally and and informally. Later we found out, by reading the Meyer, McMillan and Yoshida study of transition experiences in California, that this was a typical reaction from this group. It would have been nice to have known that ahead of time.

The Community in General: Generally speaking, the overall community response was a quiet one. Despite the fact that we were very open, to the point of making luncheon club speeches about what we were planning, there was no opposition. Not one parent called, as newspaper articles appeared and radio coverage occurred, to suggest any level of opposition.

The Board of Education: The June 9, 1980 Board of Education meeting where Board action on the transition program occurred was an interesting experience. Black leadership turned out to support the program; EMH teachers turned out to oppose it. Individual board members had many concerns over cost and plans for implementation. Some felt the program planned was too restrictive; others felt it was too inclusive. However, the Board did vote 7-0 on the principle of providing a remedy. A plan was approved to be piloted in 1980-81, as requested, including the suggested evaluation process and establishment of new criteria for EMH eligibility.

To summarize, what did we learn that you would consider, should you wish to benefit from our "lamp of experience?"

1. Plan with children and their needs as a clear first priority. If they are to succeed, they need to be adequately supported throughout the declassification and transition process.
2. Communicate with teachers, administrators and parents. They all must know what is happening and as many special meetings should be called as are needed to allay concerns and reduce rumors.
3. Avoid feelings of guilt. Initially, I think that our psychologists felt they were being accused of having placed too many minorities in EMH classes. We took the position that no one was to blame--that things were changing because of new assessment information and altered eligibility criteria. Meetings with Dr. Figueroa and the SOMPA workshop conducted by Alan Coulter did much to convince members of this group that they did not stand accused.

4. Know your community and be prepared to work with it. Declassification is simply not a project you can do by yourself. I would not suggest that you try to do so.
5. Know your staff. This is particularly important in the case of a pilot site. Don't take anything for granted. Get used to the idea that you--and the staff--are going where you have never been before. Be ready to problem-solve together, and be prepared to provide in-service, support and intervention when needed.
6. Seek input. You won't be the only one with great ideas. Others may have even better ideas or new solutions to the problems which will continue to arise. The more people who get actively involved in problem solving, the more ownership for the program will develop--and the less you will find yourself out on the end of a lonely limb.
7. Be open. Don't try to hide either motives or plans.
8. Listen. The easiest way to undermine success is to avoid listening to others. This is similar to, but also different from, seeking input. One is going out and searching for; the other is being responsive to what is offered.
9. Be flexible. The kind of change we are describing is extremely pervasive and hard to implement. You often won't be able to tell what's going to happen next. You will be more comfortable if you adopt a flexible attitude which supports a willingness to make adjustments and consider new information and suggestions.

I do not mean to suggest that these nine items will be your only considerations, but they are good for openers. If you wish to take a similar approach in your community, we would be happy to communicate with you. My final urging is, regardless of what you decide to do or not do, make your decisions based upon what is best for children.

Panelist #2/ James Mahan Ph.D Superintendent, Unit #4 Schools, Champaign, IL.

Dr. Weaver has set the scene for the development of the EMH transition program. My role in this compendium is to share with you both strategies for district-wide change and policy ramifications which have resulted from them.

At the very heart of this matter is the fact that students--whether black or white--are being placed in classes for the educable mentally handicapped which result in them being labeled "retarded." For a wide variety of reasons these students have not developed the skills which allow them to achieve and survive academically in the regular classroom. For minority students the situation is exacerbated by the fact that many lacked skills which permitted them to cope effectively with schools oriented primarily to the Anglo culture.

In addition, Unit #4 Schools, like many other school districts, had focused a great deal of energy upon the development of programs directed toward meeting the special needs of students. As the result of the creation of a large number of categorical special programs, classroom teachers have grown reluctant to assume responsibility for the learning of any student who is "different.". If a student exhibited special needs, he or she most often ended up in a resource area or a special education class. The result was that such an approach created a model of dependence on the part of regular classroom teachers, as well as students.

Some will say: "What's wrong with that?" The worst thing wrong about this situation is that teacher expectations for children placed in special classes rapidly become stereotyped. Students cannot regain a foothold in the regular program; when they are mainstreamed back into the regular classroom the expectation problem follows them, for they still wear a handicapping label.

The declassification/transition effort in Champaign is built upon a rather simple philosophy: Students and teachers should move from dependence to independence. We believe that the regular classroom should be a diversified educational setting where the needs of a wide range of students--including those who have been declassified as the result of least discriminatory assessment and altered EMH eligibility criteria-- can be met. Further, full responsibility for the education of the transition

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student rests with the regular classroom teacher. The end goal is development of a more positive set of teacher expectations for these students, accompanied simultaneously by enhancement of self-concept of transitioned students.

As children are re-evaluated, IQ test results are viewed within the context of many other kinds of information about the child, including the adaptive behavior measure which is part of the System of Multi-Cultural, Pluralistic Assessment (SOMPA). We are gaining a much fuller picture of how each individual child functions. That information is shared with both the regular classroom teacher who receives the declassified child and with his or her parents.

All of this has represented a major, philosophical turn-around for our school district. It is one thing to accomplish a turn-around at the philosophical level. It is quite something else to turn a philosophy into an educational reality for children. We have recognized that such a reality will not be created without additional training for staff and additional services for teachers and students. Therefore we have provided at the elementary and middle school levels resource people equipped with a variety of educational skills and charged with responsibility for helping teachers and parents to support the child in a successful transition experience. High on the list of essential teacher skills are competencies in curriculum based assessment and classroom management.

There are two ways to declassify children. One, which has been the rule rather than the exception, is to declassify the child and say to the teacher overnight: "The student is now yours!" We believe that the other way is the best way: to provide necessary supports to the classroom teacher, along with opportunities to develop specific additional skills. These skills--in curriculum based assessment, classroom management, and in aiding children to adjust socially--will benefit not only the declassified child, but also every one of his classroom peers.

To return to issues to policy, we all know that the identification of children for placement in special classes has carried with it the "carrot" of financial reimbursement from the state. In Champaign we have made a clear-cut decision that we are willing to forgo some of this reimbursement in order to benefit both children and teachers. In addition to facing the loss

of state/federal reimbursement, we have had to assume responsibility for additional costs of resource consulting teachers and aides needed to assure children a successful transition experience. If you add to these rather negative realities the additional fact that some parents of regular classroom children believe that the addition of declassified students to their child's class may consume unfair amounts of teacher time, you have some elements of a negative atmosphere for the introduction of this model.

Our strategy has been to address the issue head on. We did not decide to declassify and transition children "undercover," or because someone told us we had to do it. We decided to do it openly, because it was the right thing to do. The Champaign board set the tone for what we have done by voting unanimously to assume responsibility for providing a remedy. We have taken the position that teachers participating in the transition program will gain new skills and be better teachers for the experience.

We believe that the students we are serving will benefit directly, and we are working with the Illinois State Board of Education to examine incentives for such necessary expansion of the regular classroom settings. We are doing this because we believe that only by doing so will we be able to retard excessive rates of referral for special education consideration in the future.

Furthermore, we take the notion of the "least restrictive environment" very seriously. We believe that environment should be characterized by positive expectations for student achievement, that it should be a place where children can fulfill positive expectations and in fact over achieve.

Jane Mercer's definition of the misclassified child as the "six hour retardate" who performs roles in the family and community effectively but in ineffective in the role of student has had a powerful impact upon our school system, upon the community of Champaign, and certainly upon my personal views of my responsibilities as superintendent.

To call a child "mildly retarded" in order to justify providing services to him or her is to place upon that child a powerful stigma which profoundly affects the way others view him and the way he views himself as a person capable of achieving educationally.

I believe very strongly that if we base student placement on a single factor, straight intellectual capability as measured by IQ tests, we are missing the boat. I have used this example more times than I can remember,

with administrators, teachers, parents and in the many dialogues we have had with state and federal special education personnel: Let me repeat it one more time this morning. By excessively referring and placing minority children in special education classes, we have indeed placed a label on them. The label they wear is not a nice, soft academic one. It is made of adhesive tape and has the word "dumb" printed on it for all to see. What we have chosen to do in Champaign is to rip that label off and allow those children their place in the sun and in our schools--and an opportunity to achieve in our society.

As educators, we certainly should not make ourselves vulnerable to accusations that we are creating six hour retardates. We should, instead, be actively encouraging all students to achieve well above their perceived capabilities.

This is a tough issue. It is a highly political issue. Any serious attempt to reverse the practices which have contributed to severely disproportionate placement of minority children in classes for the retarded will fail without the support of a dedicated school board and strong administrative leadership.

The implementation of a philosophical turn-around, such as the one you have heard described here today, also requires a strong staff which can face up to the need for change and cope with a great number of problems and concerns in an open, honest, concise and clear fashion. Unless that happens both direction and momentum will be lost. We feel fortunate to have maintained that direction and momentum in Champaign. Thank you.

Panelist #3/ Rose Marie Adkisson, Ph.D., Coordinator of Elementary Special Education and Director of the EMH Elementary Transition Program, Unit 4 Schools, Champaign, Illinois.

Hopefully, what I am about to present will be of benefit to those who are particularly interested in the specifics of this complicated issue. Let me emphasize, as John has, that what I will present is information about change in action; I will try to capture specific situations in order to provide an accurate portrayal of a specific setting. One is encouraged, when attempting to understand the problems related to misidentification and transition programming, to learn what they can from these portrayals.

Description of Setting and Subjects

This program I will describe is being conducted in an east-central Illinois community with an approximate population of 60,000 people. The site, Carrie Busey, is an elementary school ranging from preschool through fifth-grade levels with a total population of 389 students. Seventy-two of the 389 students are children who are labeled hearing impaired, multiply impaired, orthopedically handicapped and educable mentally handicapped.

Due to the unique needs of the students at this center, several certified teachers of the educable mentally handicapped (2), learning disabled (1½) deaf (1) hearing impaired (1), orthopedically preschool (1) and 15 regular classroom teachers are assigned to this school. Also, other supportive services such as resource/consulting, speech and language, social work, Title I Reading and instructional aides make up the remainder of the staff.

The principal is totally responsible for all students who attend this center and is very receptive to programming to meet the unique needs of children. Her support is viewed as being highly significant to the success of declassification/transition efforts for EMH students.

Selected Classrooms

Two primary II EMH classrooms were placed at this site. No aides have worked with the special teacher in the past. Consequently the EMH teachers have had total responsibility as case managers and instructional implementors

for each EMH student. It should be mentioned that the school has operated as an Individually Guided Education (IGE school) for several years. This has made it possible to integrate EMH students in the past.

These students have been integrated for work-attack and math. Occasionally, integration occurred in PE, art and music classes. Scheduling has been horrendous due to the fact that the school is divided into several units. One EMH class is in the primary unit and the second in the middle unit. The grade levels of these specific units range from K-3.

Subjects.

The year began with 23 students placed in EMH classes; one student moved before the re-evaluations were completed, leaving a remainder of 22 EMH students. Students range from 8 to 10 years of age; 10 of which are girls and the remainder boys.

It was anticipated that 10 children would probably be declassified. What follows is a description of areas assessed and the declassification process.

Assessments:

The criteria was changed to meet the AAMD definition of mental retardation. All children who had not been given a recent WISC-R or Stanford Binet, Bender and Adaptive Behavior measure received these assessments. The full SOMPA was used with these subjects in order to determine adaptive behavior. Speech and language therapists used the Boehm, Peabody Picture Vocabulary, and the Utah tests as a means of assessing specific language needs. Classroom observations were conducted by the resource consulting teacher. She and her instructional aides conducted curriculum based assessments in reading, math and spelling.

Realizing that inappropriate classroom behaviors are always cited as reasons for not being able to function in regular classrooms, the EMH teacher and/or the regular classroom teacher (when appropriate), completed classroom behavior assessment, social competence scale and oppositional behavior inventory. This data is being analyzed.

As of December 15, 1980, all students had been assessed using all of the above mentioned instruments. In January 1981, it became clear that the likely number of misclassified students out numbered our anticipation. Seventeen of

22 re-evaluated students no longer qualified for EMH placement under altered criteria. This meant that seven regular classrooms would be needed to place these students, since each regular teacher would receive 2 to 3 students.

Much discussion occurred with the administrators, teachers and consultants when this was realized. The implication was clear that we could no longer justify having an EMH program in the building. As a result, it was necessary to redefine the roles of special teachers. It was proposed that one would begin training to become a resource consultant in a different building. It was felt that it would be difficult for any EMH teacher to work with the same declassified students without perpetuating expectations for their behavior based on their previous labeling. After much agony it was decided that the second EMH teacher would become a regular classroom teacher after students were declassified.

The emotional attachment that we often speak of when examining the relationship between the special teacher and her special student became obvious. The behavior that was displayed by one teacher was that of "super mom". That is still evident. This was why it was necessary to insist that this teacher should not work with declassified EMH students.

The next step was to provide inservice for the receiving teachers in order to help them to address academic needs and gain skills in conducting curriculum based assessments of transitional students. Teachers were assisted in making an analysis of task difficulties within the specified scope and sequence. How these tasks should be presented was also stressed. Behavior management skills will be addressed more specifically at a later date, but in the meantime, children who have been viewed as high risk as determined by the behavior inventory are involved in a program to increase social competence.

By the second week in January, 1981, a schedule for staffing each child and developing a transitional individualized plan was set. Children (4) who still met changed eligibility criteria were staffed and transferred to EMH classrooms at other attendance centers. Another child would have been considered for transitioning but was declared eligible for placement in the Behavior Disorder Program. After these five students were staffed and placed, the remaining 17 were scheduled for staffings, declassified and assigned to regular classes by February 10, 1981.

Parental participation in the decision-making process was at the 90 percent level. It became clear that without exception, parents were relieved about their children getting out of special education but were very aware that they were atypical and should be served in the regular program with appropriate support.

On the other hand, designated receiving teachers were less optimistic and expressed that it would be better to mislabel the child and keep him in special education. If the child improved enough he would "get out." The problem with this attitude is that the burden of proof and responsibility is placed totally on the child not the teacher. This is why it was necessary to avoid development of another mainstreaming program, but to declassify students and insist that management of the child's program become the responsibility of the regular classroom teacher.

After Declassification What?

Based on specific academic needs that are language oriented, 85 percent of the declassified students must have speech and language services in order to address moderate to mild language deficits. Along with this service will be direct instruction, primarily in reading, spelling and math areas. This may be provided by the transitional resource/consultant, instructional aides and/or the regular classroom teacher. Peer tutors are being trained as another source for providing direct instruction.

Data collected on the direct instructional program (DI) provided to eight transitional students indicate that there is an average 1.9 months gain for each month of direct instruction. This has been encouraging.

It is imperative that those who are significantly involved with the transitional program be afforded the time to communicate frequently about each child's progress. Therefore, on Tuesdays a substitute is available to the staff so that regular classroom teachers can observe children, meet with support staff or parents. This has been extremely beneficial in accomplishing the enormous task of developing a regular educational alternative for students who have atypical educational needs but are not eligible for existing special education programs.

What is to Come in the Near Future?

Several major decisions must be made prior to the commencement of the 1981-82 academic year. Needs of the pilot group for next year are yet to be determined. When expansion to other sites occurs, the following will be considered necessary or possible steps to be implemented:

1. Continued inservice for teachers who have been designated to receive declassified students in order to improve situational assessment to diagnose existing individual skills and identify areas where additional work is needed.
2. Train teachers according to already developed objectives related to academic behavioral compliance and social objectives.
3. Provide inservice to parents to help improve communication skills.
4. Plan transition days for principals of other schools which receive declassified students.
5. Inservice new resource/consultants and designated receiving teachers in curriculum-based assessment, behavior compliance and social adjustment skills.
6. Inservice instructional aides.

This list represents only what might occur. It should be mentioned that of the students in the districts, five elementary EMH classrooms will be re-evaluated, as were students in the pilot group by May 1, 1981. Staffings will be held before the end of the school year to ascertain which students will be declassified and returned to the regular classroom. It is possible that at the conclusion of this process, only two classes will remain at the elementary level. The process of providing regular educational alternatives will be repeated.

Implications of all of the above for the district's regular education program are clearly large. Students who have never been labeled EMH, but who possess similar assessment profiles can also receive services in this alternative resource program. This fact, along with steadily increasing skills on the part of regular classroom teachers, should work to significantly retard the district's excessive rate of referrals for special education consideration. Youngsters who have been curriculum disabled will no longer receive a minimal education.